FORM NLRB-501 (3-21)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD **CHARGE AGAINST EMPLOYER**

DO NOT WRITE IN THIS SPACE		
^{Case} 16-CA-312143	Date F ed 2/13/2023	

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in	which the alleged unfair labor practice occurred or is occ OYER AGAINST WHOM CHARGE IS BROUGHT	urring.
a. Name of Emp oyer	TOTER AGAINST WHOM CHARGE IS BROUGHT	b. Te . No.
Aunt Bertha, a Public Benefit Corporation d/b/a "findhelp"		512-795-4864
		c. Ce No.
	I. S D	f. Fax. No.
d. Address (Street, city, state, and ZIP code)	e. Emp oyer Representat ve	g. e-ma
3429 Executive Center Drive Suite 100	(b) (6), (b) (7)(C)	@findhelp.com
Austin, TX 78731		h. Number of workers emp oyed
. Type of Estab shment (factory, mine, wholesaler, etc.) technology company	j. Ident fy pr nc pa product or serv ce social care network and database	
The above-named employer has engaged in and is engaged		tion 8(a), subsections (1) and
(list subsections)		or Relations Act, and these unfair labor
practices are practices affecting commerce within the me		
meaning of the Act and the Postal Reorganization Act.		Ü
2. Bas s of the Charge (set forth a clear and concise state	ement of the facts constituting the alleged unfair labor p	practices)
8(a)(3) - Discharge The Employer discharged (b) (6), (b) (7)(C) in (2023.	the organizing campaign, because of union a	ctivity and support on (b) (6), (b) (7)(C)
3. Fu name of party f ng charge (if labor organization, g	rive full name, including local name and number)	
Office & Professional Employees International Un	nion, AFL-CIO	
4a. Address (Street and number, city, state, and ZIP code	e)	4b. Te . No.
80 Eighth Avenue		412-715-5435
Suite 201 New York, NY, 10011		4c. Ce No.
		4d. Fax No.
		4e. e-ma
		@tech1010.org
5. Fu name of nat ona or nternat ona abor organ zat or	n of which it is an aff ate or constituent unit (to be filled	in when charge is filed by a labor organization)
Office & Professional Employees International Un	nion, AFL-CIO	
6. DECLARATION Light declare that I have read the above charge and that the statements (b) (6), (b) (7)(C) are true to the best of my knowledge and belief.		Te . No.
		412-715-5435
are true to the best of h	(b) (6), (b) (7)(C)	Off ce, f any, Ce No.
(signature of representative or person making charge)	(Print/type name and title or office if any)	Fax No.
80 Eighth Avenue, Suite 201, NY NY, 10 Address 100	0011 Date 2/13/2023	e-ma @tech1010.org
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WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA) 29 U S C § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register 71 Fed Reg 74942 43 (Dec 13 2006) The NLRB will further explain these uses upon request Disclosure of this information to the NLRB is voluntary; however failure to supply the information may cause the NLRB to decline to invoke its processes